

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
RED PAC

<p>A.</p> <p>Full Name (Last, First, Middle Initial) FRIENDS OF BILL POSEY</p> <p>Mailing Address 1824 S. FISKE BLVD.</p> <p>City ROCKLEDGE State FL Zip Code 32955</p> <p>Purpose of Disbursement CONTRIBUTION</p> <p>Candidate Name</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: FL District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB23.5365</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="2"/> / <input type="text" value="2"/> <input type="text" value="8"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="5000.00"/></p> <p>011 Category/ Type</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) GUS BILIRAKIS FOR CONGRESS</p> <p>Mailing Address 4538 BARTELT ROAD</p> <p>City HOLIDAY State FL Zip Code 34690</p> <p>Purpose of Disbursement CONTRIBUTION</p> <p>Candidate Name</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: FL District: 09</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB23.5370</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="2"/> / <input type="text" value="2"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="2500.00"/></p> <p>011 Category/ Type</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) JIM OBERWEIS FOR CONGRESS</p> <p>Mailing Address 335 NORTH RIVER ST., SUITE 203</p> <p>City BATAVIA State IL Zip Code 60510</p> <p>Purpose of Disbursement OTHER - DEBT RETIREMENT</p> <p>Candidate Name</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: IL District: 14</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special-Primary</p>	<p>Transaction ID: SB23.5363</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="2"/> / <input type="text" value="2"/> <input type="text" value="2"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="5000.00"/></p> <p>012 Category/ Type</p>

SUBTOTAL of Disbursements This Page (optional)

12500.00

TOTAL This Period (last page this line number only)